

125 N. COURT STREET, FAYETTEVILLE, WV 25940 PHONE: 304-574-0101

Employment Application

		App	licant	Informa	ation				
Full Name:						Da	te:		
	Last	First				M.I.			
Address:									
	Street Address						Apartn	nent/Unit #	ŧ
	City					State	ZIP Co	ode	
	•								
Phone:				Email					
Date Availat	ole:								
Position Apr	olied for:								
. остант фр		YES						VE0	NO
Are you a citizen of the United States?			NO	If no, are you authorized to work in				YES .? 🔲	NO
Have you ever worked for the Town of YES NO									
Fayetteville?				If yes, \	when?_				
		YES	NO						
Have you ever been convicted of a felony?									
lf yes, expla	in:								
16 l 4 l 6:		0	41	-1	. 0 1	-0	YES	NO	
If selected for employment are you will to: Submit to a background Check?									
		Submit	to a Pr	e-employ	ment D	rug Screening Test?	YES	NO	
				, ,		3	_		
Education									
High School	:		City State						
				YES	NO				
From:	To: Di	id you gr	aduate'	? 📋		Diploma:			
			City						
College:			State	:					
From:	To: Di	id vou ar	aduata'	YES	NO	Dogroo:			

Other:	City, State:	04-4-					
From:	To: Did you graduate?	YES	NO	Degree:			
_	Refere						
Please list	three professional references.						
Full Name:				Relationship:			
Company:				51			
Full Name:				Relationship:			
Company:				Phone:			
Full Name:				Relationship:			
Company:	npany: Phone:						
	Previous Er	nnlov	mont				
Company				Dhone			
Company: Address:							
Job Title:							
Responsibil	ities:						
From:	To:	Reaso	n for Lea	aving:			
May we con	tact your previous supervisor for a reference?	YES	N [o]			
Company:				Phone:			
Address:				Supervisor:			
Job Title:	Starting Sa	Ending Salary: <u></u>					
Responsibil	ities:						
From:	To:	Reaso	n for Lea	aving:			
May we con	tact your previous supervisor for a reference?	YES	N				
_							
Company:							
Address:				Supervisor:			

Job Title:	_ Starting Salary: <u>\$</u>		Ending Salary: <u>\$</u>
Responsibilities:			
From: To:	Reason fo	r Leaving:	
May we contact your previous supervisor for a	reference?	NO	
	Military Service		
Branch:		From:	To:
Rank at Discharge:	Type of I	Discharge:	
If other than honorable, explain:			
D	isclaimer and Signat	ure	
I certify that my answers are true and compl	ete to the best of my kno	owledge.	
If this application leads to employment, I und interview may result in my release.	derstand that false or mi	sleading info	ormation in my application or
Signature:			Date: